

# PUBLICATION

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## Medicare Telehealth Waivers Extended Until March 2025

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**At the close of 2024, Congress passed, and President Biden signed into law, a long-awaited Continuing Resolution that temporarily extends certain critical programs and appropriations through March 31, 2025. The legislation, titled the "American Relief Act, 2025" (the Act), includes a short-term extension of waivers that have allowed for expanded Medicare coverage of telehealth services since the outset of the COVID-19 pandemic. While these waivers were originally tied to the end of the COVID-19 Public Health Emergency (PHE), they were previously extended by Congress through appropriations legislation and were most recently set to expire on December 31, 2024.**

We summarize below the noteworthy telehealth takeaways from the Act.

**Extended Waivers.** The Act includes a three-month extension of waivers of limitations on Medicare coverage of telehealth services that were most recently extended through the end of 2024 by the Consolidated Appropriations Act, 2023. The waivers that were extended include:

- Lifting geographic restrictions and maintaining the expanded list of originating sites including patients' homes.
- Expanding the list of distant site practitioners to include all practitioners who are eligible to bill Medicare for covered services (e.g., physical therapists, occupational therapists, speech-language pathologists, audiologists, marriage and family therapists, and mental health counselors).
- Allowing federally qualified health centers and rural health clinics to serve as distant-site providers of telehealth services.
- Allowing payment for audio-only telehealth services.
- Extending the waiver of the requirement for practitioners who provide behavioral and mental health via telehealth to provide in-person visits within six months of the first telehealth visit and annually thereafter.
- Extending Acute Care Hospital at Home waiver authorities.

**Expired Waivers.** The Act did not extend certain telehealth flexibilities that would have required legislative action to continue beyond the end of 2024. The flexibilities that expired December 31, 2024, include the following:

- Medicare reimbursement for cardiac and pulmonary rehabilitation services provided via telehealth to patients in their homes.
- High deductible health plans (HDHPs) being permitted to provide first-dollar (pre-deductible) coverage of telehealth services without jeopardizing health savings account (HSA)-eligibility. (Expiration of the safe harbor applies to plan years starting on/after January 1, 2025.)

**Takeaways.** The extensions provided by the Act are critically important to telehealth providers because without them telehealth coverage will once again be restricted by provisions in Section 1834(m) of the Social Security Act that historically limited Medicare coverage of telehealth services to services furnished to patients in rural clinical sites by a specified list of providers with limited exceptions. The extension of these waivers through

March 31, 2025, provides some temporary relief for health care providers with respect to Medicare reimbursement for telehealth services. Telehealth providers and practitioners will be awaiting further action from the new Congress before the next impending termination of these important statutory waivers, which have allowed Medicare payment for telehealth services that patients and providers have come to rely upon.

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